



AMENDMENT TRANSMITTAL LETTER

Docket No.
01191/100H584-US1

Application No.
09/943,369

Filing Date
August 29, 2001

Examiner
P. D. Niland

Art Unit
1714

Applicant(s): Ahmad Yekta et al.

Invention: COMPOSITION AND PROCESS FOR FABRICATION OF ABSORBANCE AND FLUORESCENCE STANDARDS

TO THE COMMISSIONER FOR PATENTS

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	14	- 32 =		x	
Independent Claims	3	- 4 =		x	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify): Request for continued examination (RCE) (see 37 CFR 1.114); Extension for response within third month					1,810.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					1,810.00

☒ Large Entity

☐ Small Entity

☐ No additional fee is required for this amendment.

☐ Please charge Deposit Account No. _____ in the amount of \$ _____

☒ A check in the amount of \$ 1,810.00 to cover the filing fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☒ The Director is hereby authorized to charge and credit Deposit Account No. 04-0100 as described below.

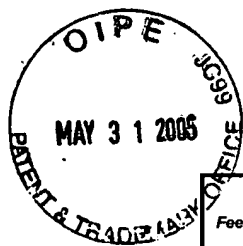
☒ Credit any overpayment.

☒ Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.

Jason C. Churney
Attorney Reg. No. 54,781

Dated: May 31, 2005

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PTO/SB/17 (12-04v2)
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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete if Known	
FEE TRANSMITTAL For FY 2005		Application Number	09/943,369
		Filing Date	August 29, 2001
		First Named Inventor	Ahmad Yekta
		Examiner Name	P. D. Niland
		Art Unit	1714
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket No.	01191/100H584-US1
TOTAL AMOUNT OF PAYMENT		(\$)	1,810.00

METHOD OF PAYMENT (check all that apply)	
<input checked="" type="checkbox"/> Check	<input type="checkbox"/> Credit Card
<input type="checkbox"/> Money Order	<input type="checkbox"/> None
<input type="checkbox"/> Other (please identify): _____	
<input type="checkbox"/> Deposit Account	Deposit Account Number: <u>04-0100</u> Deposit Account Name: <u>Darby & Darby P.C.</u>
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
	FILING FEES		SEARCH FEES		EXAMINATION FEES		
		<u>Small Entity</u>		<u>Small Entity</u>		<u>Small Entity</u>	
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____
2. EXCESS CLAIM FEES							
						<u>Small Entity</u>	
						Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)						50	25
Each independent claim over 3 (including Reissues)						200	100
Multiple dependent claims						360	180
<u>Total Claims</u>		<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>		
14		- 32 =	x	=	<u>Fee (\$)</u>		<u>Fee Paid (\$)</u>
<u>Indep. Claims</u>		<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>			
3		- 5 =	x	=			
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>		<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>		
_____	- 100 =	. /50 _____ (round up to a whole number) x		_____	=		
4. OTHER FEE(S)							
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): 1801 Request for continued examination (RCE)						790.00	
1253 Extension for response within third month						1,020.00	

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	54,781
Name (Print/Type)	Jason C. Chumney	Telephone	(212) 527-7700
		Date	May 31, 2005



Certificate of Express Mailing Under 37 CFR 1.10

MS RCE
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Signature

Signature

Typed or printed name of person signing Certificate

Typed or printed name of person signing Certificate

Registration Number, if applicable

212-527-7774
Telephone Number

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Fee Transmittal for FY 2005 (1 page);
Amendment in Response to Final Office Action (9 pages);
Request for Continued Examination Transmittal (1 page);
Amendment Transmittal Letter (1 page);
Three Month Petition for Extension of Time Under 37 CFR 1.136(a) (1
pages);
Return Postcard; and
Check No. 8751 for \$1,810.00